

309000000006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

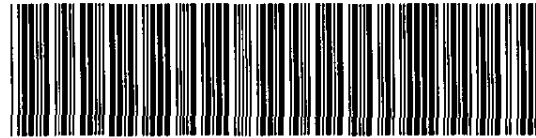
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200139379492

01/06/09--01025--023 **1000.00

RECEIVED
09 JAN -6 AM 11:38
TALLAHASSEE, FLORIDA

B. KOHR
JAN 15 2009
EXAMINER

FILED
09 JAN 15 PM 12:45
TALLAHASSEE, FLORIDA

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 01-06-09

NAME: VOGUE CAPITAL MANAGEMENT FUND LP

TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

COST: CK FOR \$1000 ATTACHED

RETURN:

ACCOUNT: ~~FCA0000000015~~

AUTHORIZATION: ~~ABBIE/PAUL HODGE~~

FILED
09 JAN 15 PM 12:45
TALLAHASSEE, FLORIDA

2nd



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 7, 2009

FLORIDA FILING & SEARCH

TALLAHASSEE, FL

SUBJECT: VOGUE CAPITAL MANAGEMENT FUND, LP
Ref. Number: W09000000461

FILED
09 JAN 15 PM 12:45
TALLAHASSEE, FLORIDA

RECEIVED
09 JAN 15 AM 10:27
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for VOGUE CAPITAL MANAGEMENT FUND, LP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$1,000.00 payment.

Before this limited partnership can be filed, its general partner -- NOVEL CAPITAL MANAGEMENT LTD. -- must be registered in Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 209A00000347

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA

FILED
09 JAN 15 PM 12:45
TALLAHASSEE, FLORIDA

1. Vogue Capital Management Fund, LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Delaware

(State or Country of Formation)

3. 12-29-08

(Date of Formation)

4. Novel Capital Management Ltd.

(Name of Registered Agent for Service of Process)

5. c/o Joseph Haykov, 2741 Parkview Drive

(Florida street address for Registered Agent)

Hallandale, FL 33009

6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to
comply with the provisions of all statutes relative to the proper and complete performance of my duties,
and I am familiar with and accept the obligations of my position as registered agent.

Joseph Haykov

Signature of Registered Agent

7. c/o Appleby, Clifton House, 75 Fort Street

(Principal office address)

Grand Cayman KY1-1006, Cayman Islands, BWI

8. If limited partnership is a limited liability limited partnership, check box ☐

9. c/o Appleby, Clifton House, 75 Fort Street

(Mailing address)

Grand Cayman KY1-1006, Cayman Islands, BWI

10. Name, principal office address, and mailing address of each general partner:

Novel Capital Management Ltd.

(Name)

c/o Appleby, Clifton House, 75 Fort Street

(Street Address)

Grand Cayman KY1-1006

Cayman Islands, BWI

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

_____	_____
(Name)	(Street Address)

	(Mailing Address)

_____	_____
(Name)	(Street Address)

	(Mailing Address)

11. Effective date, if other than the date of filing: _____.

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 24th day of December, 20 08.

Signature of a general partner:



Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VOGUE CAPITAL MANAGEMENT FUND, LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF JANUARY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VOGUE CAPITAL MANAGEMENT FUND, LP" WAS FORMED ON THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



4640648 8300

090003513

You may verify this certificate online
at corp.delaware.gov/authver.shtml

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 7060577

DATE: 01-05-09